## Pesticide Spray Report

| DATE OF APPLICATION:  |                             |  |                                   |   | DO NOT ENTER<br>UNTIL (DATE/TIME):  |
|---|-----------------------------|--|-----------------------------------|---|---|
| WEATHER CONDITIONS:   |                             |  |                                   |   |   |
| Time (begin/end):   |                             | RTLY CLOUD   | CLOUDY                            | RAINY   |   |
| Air Temperature: °F °C Relative Humidity (%):                 |                             |  |                                   |   |   |
| Wind Direction (wind out of): Wind Velocity (mph):            |                             |  |                                   |   |   |
| JOB PERFORMED:  | FERTILIZE SPRAY             | OTHER  |                                   |   |   |
| CROP TREATED:   | CORN SOYBEANS               | WINTER   | WHEAT                             | OTHER _   |   |
| TIMING (of application):                                      | PREPLANT (BURNDOWN)         | PRE-EMERO  | GE POST-EN                        | MERGE   | OTHER   |
| CARRIER USED:   | WATER OTHER_                |  | TOTAL AMT.                        | CARRIER   | USED:   |
| TARGET PEST:  | BROADLEAF WEEDS             | GRASS WEEDS  | INSECTS                           | FUNGUS  | OTHER   |
| METHOD OF APPLICATION: (sprayer type)                         |                             |  |                                   |   |   |
| AIR-BLAST   | OTHER                       | CO2 HANI   | O SPRAYER                         | BOOM S  | PRAYER  |
| PRODUCT<br>BRAND NAME   | INGREDIENT<br>(common name) | PRODUCT<br>APPLICATION<br>RATE (per acre) (i.e. 1 qt/<br>5 oz/A) | CONCEN<br>A or (Total amount of p | CATION<br>TRATION<br>roduct used per tank)<br>rt per 295 gals H <sub>2</sub> O) | TOTAL APPLICATION RATE<br>(per acre)<br>(PRODUCT + CARRIER)<br>(i.e. 20 gals/A) |
|   |                             |  |                                   |   |   |
|   |                             |  |                                   |   |   |
|   |                             |  |                                   |   |   |
|   |                             |  |                                   |   |   |
|   | ,                           |  | 1                                 |   | 1   |
| APPLICATOR'S NAME: (PRINTED)                                  |                             |  | APPLICATOR'S TELEPHONE NUMBER     |   |   |
|   |                             |  |                                   |   |   |
| APPLICATORE'S SIGNATURE                                       |                             |  | APPLICATOR'S CERTIFICATION NUMBER |   |   |
|   |                             |  |                                   |   |   |
| RESEARCH PROJECT LEADER  Comments and Additional Information: |                             |  | PROJECT LEADER'S TELEPHONE NUMBER |   |   |
| Commence and reductorial information.                         |                             |  |                                   |   |   |



Kellogg Biological Station